STATEMENT OF

RECEIVED

FORM 1		ORGA	NIZATI	ON 2	FEC MAIL	AM 9: 35
NAME OF COMMITTEE (in	ı full)	(Check if is changed		cample:If typing, type er the lines.	12FE4M	
NEW JERSEY SENATORIAL CAUCUS						
ADDRESS (number a	nd street)	P. O. BO	X 8394			
(Check if ac is changed)		DELRAY	BEACH		FL	33482
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) UnitedStatesSenatorialCaucuses@yahoo.com (Check if address is changed)						
COMMITTEE'S WEB PAGE ADDRESS (URL)						
(Check if is change						
2. DATE ÏO ' 29° ' 2012 '						
3. FEC IDENTIFICATION NUMBER C						
4. IS THIS STATE	MENT X	NEW (N)	OR [AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name of Treasurer RICHARD KEVINSTON						
Signature of Treasurer Date 10 st 29° 20°12 °						
NOTE: Submission of false, erroneous, or inetimplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use Only				For further information Federal Election Commis Toli Free 800-424-9530		FEC FORM 1 (Revised 02/2009)